

PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA				COURT CASE NUMBER CA No. 05-10192-RWZ	
DEFENDANT ONE STAR CLASS SLOOP SAILBOAT BUILT IN 1930 WITH HULL NUMBER 721, NAMED "FLASH II"				TYPE OF PROCESS Complaint and Warrant & Monition	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Gregory Olaf Anderson				
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) 321 West Arcade Avenue, Clewiston, FL 33440				
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:				Number of process to be served with this Form - 285	
Shelbey D. Wright, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210				Number of parties to be served in this case	
				Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)					
Please serve the attached Verified Complaint and Warrant & Monition, upon the above-referenced individual by certified mail, return receipt requested. 05-DEA-442507 LJT x3283					
Signature of Attorney or other Originator requesting service on behalf of: Shelbey D. Wright/LJT			<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (617) 748-3100	DATE February 9, 2005
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE					
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. 38	District to Serve No. 38	Signature of Authorized USM Deputy or Clerk Wright/LJT	Date 2/10/05
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).					
Name and title of individual served (If not shown above).				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)				Date of Service 2/28/05	Time am pm
				Signature of U.S. Marshal or Deputy Wright/LJT	
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Amount or Refund

REMARKS: **2/11 Certify # 7002 0510 0004 1358 2079**
2/18/05 Delivery Date

PRIOR EDITIONS MAY
BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD ☐ NOTICE OF SERVICE ☐ BILLING STATEMENT ☐ ACKNOWLEDGMENT OF RECEIPT